

Request for Research Staff Appointment
Harry S. Truman Memorial Veterans' Hospital (HSTMVH)

INSTRUCTIONS: To be completed by Principal Investigator.

1.	Name:
	Phone:
	Email:

2.	Is request for recurring annual appointment? If Less: List projected termination date:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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3.	Has Application for Federal Employment (OF-612) been completed (and attached)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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4.	Has the Questionnaire for Non-Sensitive Positions (SF-85) been completed (and attached)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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5.	Has documentation of HIPAA functional assignment been attached?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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6.	Will applicant be involved in Human Research? If Yes: Human Research training will be required. <u>Note.</u> Work with commercially available human cell lines is not defined as human research.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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7.	Will applicant be involved in Animal Research? If Yes: Animal Care and Welfare training will be required.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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8.	Will applicant work with human blood or body fluids? If yes: Research Safety training will be required.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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9.	Will applicant work with human organs or tissues? If yes: Research Safety training will be required.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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10.	Will applicant work with commercially available human cell lines? If yes: Research Safety training will be required.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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11.	Will applicant work with biological hazards/infectious substances? If yes: Research Safety training will be required.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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12.	Will applicant work with microbial agents? If yes: Research Safety training will be required.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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13.	Will applicant work with recombinant DNA? If yes: Research Safety training will be required.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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14.	Will applicant work with hazardous chemicals?		
	Highly Toxic?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	Flammable/Explosive/Corrosive?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	Mutogenic/Teratogenic?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	Toxic compressed gases?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	If any item is marked yes: Research Safety training will be required.		

15.	Will applicant work with controlled substances (including use for animal surgeries)? If yes: Research Safety training is required.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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16.	Will applicant work with ionizing radiation? If yes: Radiation Safety training will be required.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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17.	Will applicant work with non-ionizing radiation? If yes: Radiation Safety training will be required.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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18.	Will applicant be credentialed as an independent practitioner at the HSTMVH? If no: A request for Functional Statement of Duties and Responsibilities must be attached; credentials verification and a background investigation, as needed, will be initiated.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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19.	INVESTIGATOR ACKNOWLEDGEMENT OF RESPONSIBILITY	
<p>I acknowledge my responsibility to provide comprehensive orientation and training for the designated Research staff member; the required orientation and training will include the following:</p> <ul style="list-style-type: none"> (a) Participation in hospital-wide New Employee Orientation (required only for VA-paid employees) (b) Completion of Hospital Safety Training (c) Completion of all required research-specific orientation/training (specified in this application) (d) Participation in laboratory-specific training (provided by PI) <p>I certify that, to the best of my knowledge, my research employees will work in an environment which is compliant with all applicable Federal, State, and local policies, regulations, and CDC/NIH/FDA Guidelines governing research activities. I further certify that all technical and incidental employees involved with my research studies will be made aware of potential hazards, the degree of personal risk (if any), and will receive instructions and training on the proper handling and use of biohazardous materials, chemicals, radioisotopes, and physical hazards.</p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="width: 45%;"> <p>_____ Principal Investigator (print)</p> <p>_____ Principal Investigator (signature)</p> </div> <div style="width: 45%; text-align: right;"> <p>_____ Date</p> </div> </div>		